| Effective on 12/08/2004. | | | | | |
|---|---|---|----------------------|---|--|
| Effective on 12700/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). | | Complete if Known | | | |
| FEE TRANSMITTAL | | Application Number | 10/517,509 | | |
| For FY 2009 | | Filing Date | 6/11/2003 | | |
| FOFF1 2009 | | First Named Inventor | | | et al. |
| Applicant claims small entity status. See 37 CFR 1.27 | | Examiner Name Samira Jean-Louis | | | |
| | | Art Unit 1617 | | | |
| TOTAL AMOUNT OF PAYMENT (\$) 180.00 | | Attorney Docket 0470 - 045922 | | | |
| METHOD OF PAYMENT (check all that apply) | | | | | |
| Check Credit Card Money Order None Other (please identify): | | | | | |
| Deposit Account Deposit Account Number: 23-0650 Deposit Account Name: The Webb Law Firm | | | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | | |
| Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee | | | | | |
| Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 | | | | | |
| WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. | | | | | |
| FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) | | | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | |
| FILING FEES SEARCH FEES EXAMINATION FEES | | | | | |
| Small En Application Type Fee (\$) Fee (| | <u>ll Entity </u> | mall Entity Fee (\$) | Foor P | 'aid (\$) |
| Utility 330 82 | | 270 220 | 110 | reesi | aid (a) |
| Design 220 110 | 100 | 50 140 | 70 | | |
| Plant 220 110 | 330 | 165 170 | 85 | | The state of the s |
| Reissue 330 165 | | 270 650 | 325 | *** | |
| Provisional 220 110 | | 0 0 | 0 | *************************************** | |
| 2. EXCESS CLAIM FEES | · · | 0 0 | V | • | C |
| | | | | Fee (\$) | Small Entity Fee (\$) |
| Each claim over 20 (including Reissues) 52 | | | | | 26 |
| Each independent claim over 3 (including | | | 220 | 110 | |
| Multiple dependent claims | | | | 390 | 195 |
| <u>Total Claims - 20 or HP Ext</u> | ra Claims Fee (| <u>S)</u> <u>Fee Paid (S)</u> | | Multiple De | ependent Claims |
| HP = highest number of total claims paid for, if | X | | | Fee (\$) | Fee Paid (\$) |
| | greater than 20. | | | | <u> </u> |
| Indep. Claims - 3 or HP Ext | <u>ra Claims</u> <u>Fee (</u> x | (\$) Fee Paid (\$) | | | ₩. |
| HP = highest number of independent claims paid | | | | | |
| 3. APPLICATION SIZE FEE | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. | | | | | |
| See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | |
| Total Sheets Extra Sheets | *************************************** | ach additional 50 or frac | ction thereof F | <u>'ee (\$)</u> | Fee Paid (\$) |
| 100 = / 50 = (round up to a whole number) x = | | | | | |
| | | | | | Fees Paid (\$) |
| Non-English Specification, \$130 fee (no small entity discount) | | | | | |
| Other (e.g., late filing surcharge): Supplemental Information Disclosure Statement | | | | | 180 |
| SUBMITTED BY | | | | | |
| Signature // u/ | 112 | Registration No. | 22,132 Telep | hone 41 | 2-471-8815 |
| Name (Print/Type) William H. Logsdon Date October 20, 2009 | | | | | |